

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

AKSM Urology Political Action Committee 'AKSM Urology PAC'

Full Name (Last, First, Middle Initial)

A. Barry Gordon

Mailing Address 8003 S. Michele Lane

City

Tempe

State

AZ

Zip Code

85284

FEC ID number of contributing
federal political committee.

C

Name of Employer

Urologic Consultants, PC

Occupation

MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		0	9		2	0	1	5		

Transaction ID : SA11AI.11446

Amount of Each Receipt this Period

250.00

profit distribution deduction

Full Name (Last, First, Middle Initial)

B. Sam Graham

Mailing Address 1306 Old Logan Road

City

Manakin Sabot

State

PA

Zip Code

23103

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCA

Occupation

MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	7		2	0	1	5		

Transaction ID : SA11AI.11045

Amount of Each Receipt this Period

250.00

profit distribution deduction

Full Name (Last, First, Middle Initial)

C. Sam Graham

Mailing Address 1306 Old Logan Road

City

Manakin Sabot

State

PA

Zip Code

23103

FEC ID number of contributing
federal political committee.

C

Name of Employer

HCA

Occupation

MD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		2	8		2	0	1	5		

Transaction ID : SA11AI.11483

Amount of Each Receipt this Period

250.00

profit distribution deduction

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►